

ADVERSE CHILDHOOD EXPERIENCES AND RELATIONSHIP QUALITY. THE MEDIATING ROLE OF CONFLICT STYLES

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Abstract

Studies show that up to 64% of the population reports at least one adverse childhood experience (Felitti *et al.*, 1998). Among various other negative outcomes, these are related to reduced social functionality during adulthood, such as increased conflict and decreased quality of romantic relationships (Baumann *et al.*, 2024; Gobout *et al.*, 2020). This study explores the possible mediating role of couple conflict styles in the relationship between adverse childhood experiences and relationship quality in a non-clinical sample of adults involved in a romantic relationship. 176 participants (M age = 24.09 years, SD age = 7.41 years, 87.7 % women) completed an online survey containing the Adverse Childhood Experiences Questionnaire (Felitti *et al.*, 1998), the Conflict Resolution Styles Inventory (Kurdek, 1994) and the Revised Dyadic Adjustment Scale (Busby *et al.*, 1995). The hypotheses were tested using Pearson correlations and mediation analyses. The results show that dysfunctional, but not the functional conflict styles, mediate the negative association between adverse childhood experiences and relationship quality. The results, as well as their practical implications, are discussed.

Keywords: adverse childhood experiences; trauma; conflict; relationship satisfaction.

An individual's past has a significant impact on the development of identity and behavior in adulthood. Among the most representative contexts we can find the relationships with parents or the living environment. However, not all the experiences are optimal. Depending on their nature, the individual may be impacted either positively or negatively. Studies show that up to 64% of the population reports at least one adverse childhood experience (Felitti *et al.*, 1998). The literature describes several categories of adverse childhood experiences: abuse (physical, emotional, or sexual), neglect (physical or emotional), and household dysfunctions (parents suffering from mental illness or substance abuse, mothers suffering from intimate partner violence, divorce, incarcerated relatives, etc.) (O'Neill *et al.*, 2021). These experiences occur outside the range of the expected normative environment and require a significant level of adaptation from the child in terms of their psychological, social, and neurodevelopmental systems (McLaughlin, 2016). They cause harm and distress, thus disrupting physical or psychological health and

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the child's development (Aytur *et al.*, 2022; Kalmakis & Chandler, 2014). Moreover, they significantly impact the quality of future relationships. Of particular interest for this study, there is strong evidence linking childhood trauma to low quality couple relationships (Baumann *et al.*, 2024; Gobout *et al.*, 2020). However, the possible mediation role of other couple processes is less explored and with this study, we aimed at testing whether couple conflict styles can explain the relationships between adverse childhood experiences and couple satisfaction.

ADVERSE CHILDHOOD EXPERIENCES

Children exposed to adverse experiences are predisposed to developing personality changes, suicidal behaviors, depression, and other psychiatric disorders, including post-traumatic stress disorder (Pervanidou & Chrousos, 2007). During adulthood, the majority of survivors of sexual abuse report the loss of trust and self-esteem, as well as amnesia occurring during or after the sexual abuse. Individuals who experienced childhood neglect and a lack of parental affection face threats to healthy development and well-being (Freyd, 1996; Rutter & Sroufe, 2000). Furthermore, abused children or those who witnessed family violence may experience difficulties in adequately adapting to stress, especially when they lack positive relationships with adults. They lack effective models for problem-solving and a sense of personal control or predictability. Consequently, they are at increased risk of adopting neglectful or abusive parenting styles or of becoming victims of psychological or physical violence, through a process of imitation (Greene *et al.*, 2020; Luthar *et al.*, 2000; Williams & Adams Rueda, 2022). Adverse childhood experiences also represent the context for the development of trauma, which can be direct (exposure to actual or threatened death, serious injury, or sexual violence) or indirect (witnessing what occurred to a close person), acute (experiencing a single traumatic event) or chronic (exposure to prolonged, repeated traumatic events that are often invasive and interpersonal in nature) (Deutsch *et al.*, 2020). Of particular interest, especially for the family domain, is betrayal trauma, which involves the violation of implicit and explicit trust by the people or institutions on whom a person depends for survival (Freyd, 1994). Therefore, the closer the relationship, the greater the perceived betrayal. Often, the victim cannot accept the betrayal because they cannot stop trusting the betrayer (i.e., the child must ignore the betrayal, especially if the abuser is a primary caregiver, as the need for survival is more important).

ADVERSE CHILDHOOD EXPERIENCES AND RELATIONAL SATISFACTION

A number of studies discuss the relationship between adverse childhood experiences and the quality of couple relationships. Adverse childhood experiences have a significant effect on social and romantic relationships and can contribute to relationship problems and reduced relationship quality by affecting levels of satisfaction (Sheffler *et al.*, 2019). First, adverse childhood experiences,

specifically child maltreatment, lead to intimate partner violence, particularly female victimization and male perpetration (Straus *et al.*, 2017; Wheeler *et al.*, 2022). In addition, other childhood adversities, especially abuse, are associated with higher likelihood of relationship dissolution, low marital satisfaction, poor relationship adjustment, high levels of psychological stress and low sexual satisfaction within the relationship (Bigras *et al.*, 2017; Daigneault *et al.*, 2009; Godbout *et al.*, 2019; Miller *et al.*, 2013; Nelson & Wampler, 2000; Whisman, 2006). Lastly, adverse childhood experiences such as abuse, neglect, and witnessing violence against one's mother increase the risk of developing post-traumatic stress disorder (PTSD) (Brockie *et al.*, 2015). PTSD symptoms are associated with high level of relational dissolution, increased divorce rates, both physical and psychological aggression, intimacy problems, relationship dissatisfaction, and poor family adjustment (Fredman *et al.*, 2010; Kessler *et al.*, 1998; Lambert *et al.*, 2012; Miller *et al.*, 2013; Monson *et al.*, 2009; Riggs, 2014; Riggs *et al.*, 1998; Taft *et al.*, 2011).

THE MEDIATING ROLE OF CONFLICT

Past studies have identified a link between adverse childhood experiences and the levels of conflict in adult couple relationships (Poole *et al.*, 2018). Individuals who witnessed or experienced violence in their family of origin can learn aggressive behaviors through modeling, later becoming victims or perpetrators in their own families (Straus *et al.*, 2017; Wheeler *et al.*, 2022). Additionally, adverse childhood experiences predict conflict in romantic relationships (Kogan *et al.*, 2016), and are significantly and positively associated with disengagement strategies when solving conflicts (Solberg *et al.*, 2023). Observing the interparental aggression between mother and father was associated with aggressive behaviors in late adolescence toward non-family members, especially within romantic relationships (Foo & Margolin, 1995; Mangold & Koski, 1990). There are associations between the quality of parent – child conflict resolution and the ways conflict is managed in the individual's current adult couple relationship (Reese-Weber & Bartle-Haring, 1998). Individuals who experienced conflict in childhood are more likely to experience conflict in later romantic relationships and to escalate it to the level of abuse (MacIntosh, 2019). In addition, parental hostility and coercion during adolescence are predictors of low levels of warmth and high levels of hostility toward the romantic partner during conflictual discussions in early adulthood (Conger *et al.*, 2000). Negative interactions with parents have been shown to predict significantly negative levels of emotions expressed toward romantic partners years later (Kim *et al.*, 2001). Additionally, individuals who are physically abused in childhood are more likely to be violent towards their romantic partner, giving rise to the cycle of violence, which is more likely to be perpetuated when the child was directly involved in violent or aggressive behaviors rather than merely a witness. Likewise, for more positive behaviors to be perpetuated, the child would need to have been involved in such situations with their parents (DeMARIS, 1987; Marshall & Rose, 1988).

Researchers also indicate that the conflict resolution styles that one experiences and observed in their family of origin are similar to the ones they use in other dyads (Reese-Weber & Bartle-Haring, 1998). If the parent and child use an attack, avoidance or compromise based resolution style, the adolescent is more likely to use these styles in their romantic relationships (Reese-Weber & Bartle-Haring, 1998). The Social learning theory focuses on the interaction between the individual and the social environment (Gelles & Straus, 1979). It assumes that learning can occur both through observation-imitation and through direct experience within the social learning system, allowing new types of behaviors to be acquired (BANDURA, 1971). As such, adolescents observe their parents' attempts to resolve interparental conflicts and imitate these behaviors in their own conflicts (Reese-Weber & Bartle-Haring, 1998). Thus, individuals who have gone through negative childhood experiences, for example, witnessing conflicts between parents, are more likely to use dysfunctional strategies and negative tactics for approaching and resolving conflict in couple relationships (Delevi *et al.*, 2012)

Experiencing conflicts and disagreements, even over minor issues, has been associated with low satisfaction in romantic relationships (Cooper *et al.*, 2018). However, it is important to note that the strategies used to resolve conflicts are much stronger indicators of relationship satisfaction than the mere presence of conflict itself (Flora & Segrin, 2015). Having an effective conflict resolution style is crucial for maintaining marital satisfaction (Barry, 1970; Patterson *et al.*, 1976; Raush *et al.*, 1974; Scanzoni, 1965). Escalation and continuation of conflicts due to failure to resolve them in a timely manner can lead to marital dissatisfaction, and distressed couples have significantly more unresolved problems and conflicts compared to satisfied couples who are not in distress (Birchler & Webb, 1977). Distressed couples experience fewer positive cognitive communications and poorer problem-solving during conflict situations compared to those who report a satisfying marriage. Moreover, the two types of couples resolve conflicts differently; distressed couples communicate in hostile manner, leading to conflict escalation (Billings, 1979). The use of coping strategies that involve conflict and avoidance has been shown to be ineffective in reducing stress and to produce particularly unsatisfactory outcomes. Consequently, distressed couples are more likely to use strategies that promote emotional stress (Whiffen & Gotlib, 1989). According to the Interdependence theory (Rusbult, 1983), individuals are expected to be more satisfied with a relationship when it provides high rewards and low costs that exceed their expectations. Individuals who share many common interests with their romantic partner (high rewards), argue infrequently (low costs), and have low expectations regarding romantic involvement in general (low comparison level) should therefore be relatively satisfied with their involvement (Rusbult, 1983). Thus, the relationship between conflict resolution strategies and couple satisfaction is causal. Specifically, perceived relationship rewards, the frequency with which constructive conflict resolution strategies are used, and perceived costs, the frequency with which negative conflict resolution styles are experienced, determine relationship satisfaction (Kurdek, 1994). Marital satisfaction is positively

associated with the frequency with which both partners use positive conflict resolution strategies, such as understanding, compromise and humor, and negatively associated with the frequency with which each partner uses destructive conflict resolution strategies, such as conflict engagement, withdrawal and defensiveness (Kurdek, 1995). Conflict resolution styles based on avoidance or attack and defense have negative consequences for relationship quality (Gottman & Driver, 2005). Moreover, studies on conflict resolution styles in adolescence have shown several gender-related differences; specifically, women tend to engage in more destructive problem-solving behaviors compared to their male partners (Connolly *et al.*, 2015). Furthermore, the link between conflict resolution and relationship longevity or stability during adolescence has been examined, yielding results similar to those found in adults. Adolescents who use more constructive strategies to resolve conflicts with romantic partners have significantly longer and more stable relationships (Ha *et al.*, 2013; Shulman *et al.*, 2006). Lastly, in adolescence, frequent disagreements with romantic partners over a period of at least two weeks are associated with lower relationship satisfaction (Todorov *et al.*, 2021).

THE CURRENT STUDY

The objective of this paper is to analyze the relationship between adverse childhood experiences, conflict and couple relationship quality. Based on the existing literature, we propose the following hypotheses: (H1) We assume that there is a significant negative relationship between adverse childhood experiences and couple relationship quality; (H2) We assume that there is a significant positive relationship between adverse childhood experiences and dysfunctional conflict styles; and a significant negative relationship between adverse childhood experiences and constructive conflict styles; (H3) We assume that there is a significant negative relationship between dysfunctional conflict styles and couple relationship quality; and a significant positive relationship between constructive conflict styles and couple relationship quality; (H4) We assume that conflict styles mediate the relationship between adverse childhood experiences and couple relationship quality.

METHOD

PARTICIPANTS

Participants were selected based on the following criteria: to be over 18 years old and to be in a romantic relationship. Thus, we had an initial number of 177 people, of which one was eliminated for not meeting the age criterion, thus remaining with $N=176$, of which 80.7% were women ($N=142$), 18.8% were men ($N=33$) and 0.9% non-binary ($N=1$). The mean age is 24.09, with $SD=7.40$, with the youngest participant being 18 years and the oldest being 56 years old. Also, 76.1% ($N=134$) of the participants live in urban areas and 23.9% ($N=42$) live in rural areas, and the most common last level of education was high school with 65.3% ($N=115$), along

with bachelor's degree 26.1% ($N=46$), master's degree 4.5% ($N=8$), post-secondary education 2.8% ($N=6$), primary and secondary education 0.6% ($N=1$) each. Regarding sexual orientation, 79% are heterosexual ($N=139$), 10.2% bisexual ($N=18$), 4.5% homosexual ($N=8$) and 6.3% ($N=11$) preferred no to answer. 82.4% ($N=145$) of the participants are in a romantic relationship, 14.8% ($N=26$) are married and 2.8% ($N=5$) are engaged, and the duration of the relationships has a mean of 54.67 months, $SD=75.23$ months.

INSTRUMENTS

Adverse Childhood Experiences – ACE Questionnaire (Felitti *et al.*, 1998) was used to assess adverse childhood experiences. The ACE questionnaire consists of 28 items, which refer to experiences of abuse, neglect, and household dysfunction before the age of 18. For 10 items, the responses are dichotomous (yes/no) (e.g. 'Did you live with anyone who was a problem drinker or alcoholic?'), while for the others, the participants are asked to indicate the extent to which they experienced some events using response options such as „Never”, „Once or twice”, „Sometimes”, „Often”, or „Very often” (e.g. 'You had to wear dirty clothes?'). For this scale, only the total score was used, and internal consistency was acceptable, with a Cronbach's alpha of $\alpha = 0.70$.

Conflict Resolution Styles Inventory – CRSI (Kurdek, 1994) was used to examine conflict resolution styles. It is a 16-item self-report measure, using a Likert-type scale, that assesses each partner's individual style of managing conflict. The instrument is grounded in the conceptual position that relationship maintenance and stability are influenced by each partner's individual approach to conflict resolution. Total CRSI scores range from 16 to 80. The scale comprises four dimensions, each consisting of four items such as, conflict engagement (e.g. 'Launching personal attacks'), positive problem solving (e.g. 'Focusing on the problem at hand'), withdrawal from conflict (e.g. 'Remaining silent for long periods of time') and compliance. For each item, response options range from 1 (never) to 5 (always). For the total scale, Cronbach's alpha indicated acceptable internal consistency ($\alpha = 0.73$). The reliability coefficients for the subscales were as follows, conflict engagement ($\alpha = 0.85$), positive problem solving ($\alpha = 0.67$), withdrawal from conflict ($\alpha = 0.83$), and compliance ($\alpha = 0.78$).

Revised Dyadic Adjustment Scale, RDAS (Busby *et al.*, 1995) was used to assess the quality of the couple relationship. The scale was previously validated on Romanian population (Turliuc & Muraru, 2013). The RDAS consists of 14 items, each requiring respondents to evaluate specific aspects of their relationship using 5 or 6 point rating scales (e.g. 'How often do you discuss or have you considered divorce, separation, or terminating your relationship?') RDAS scores range from 0 to 69, with higher scores indicating greater relationship satisfaction and lower scores reflecting higher levels of relationship distress. In the present study, the scale demonstrated good internal consistency, with a Cronbach's alpha of $\alpha = 0.83$.

Sociodemographic variables. With regard to sociodemographic characteristics, data were collected on participants' gender, age, area of residence, level of education, sexual orientation, marital status and relationship duration. Inclusion criteria ensured that only individuals aged 18 years or older who were currently involved in a romantic relationship were included in the study.

PROCEDURE

We used the back-translation method for the scales that were not previously validated on the Romanian population. The scales were administered in Romanian, online, via Google Forms, with the link distributed across various social media platforms targeting both students and individuals of all age groups. Prior to completing the questionnaire, participants read the informed consent form, which clearly stated their right to withdraw from the study at any time without any negative consequences. Participation was voluntary and anonymous, and participants were assured of the confidentiality of the collected data. The average completion time was approximately 10–15 minutes. Eligibility criteria required participants to be over 18 years old and to be involved in a romantic relationship at the time of participation.

DATA ANALYSIS

All the analyses were conducted using IBM SPSS 20. First, descriptive analyses were conducted, and correlations were computed among the study variables (adverse childhood experiences, conflict resolution styles, and relationship quality). Next, we examined whether adverse childhood experiences predicted relationship quality. Finally, mediation analyses were performed to assess the indirect effects of adverse childhood experiences on relationship quality through the four conflict resolution styles, namely conflict engagement, positive problem solving, withdrawal, and compliance. We used Baron & Kenny (1986) method to test for mediation. The significance of the indirect effect was tested with the Sobel test, using an online tool (<https://quantpsy.org/sobel/sobel.htm>).

RESULTS

PRELIMINARY DATA ANALYSIS

The descriptive statistics can be seen in Table 1. Skewness and kurtosis values were calculated to assess the normality of the data distribution. However, the values exceeded the commonly accepted limits of 2/-2. For the variable Adverse Childhood Experiences (ACE), a kurtosis value of 4.221 was obtained, well above the acceptable range, indicating that the variable was not normally distributed. Consequently, it was necessary to normalize the ACE variable to proceed with parametric tests, creating a transformed variable (see Templeton, 2011). Skewness

and kurtosis values were recalculated, and all values fell within the 2/-2 range. Therefore, all analyses in this study were conducted using parametric tests.

Table 1

Descriptive statistics

Variables	M	SD	Min	Max	Skewness	Kurtosis
1. Adverse childhood experiences	43.91	11.71	32	96	.09	-.41
2. Conflict engagement	8.26	3.59	4	20	.98	.67
3. Positive problem solving	15.29	2.80	4	20	-.65	.81
4. Withdrawal	9.52	3.99	4	20	.57	-.43
5. Compliance	8.12	3.44	4	19	.73	.05
6. Couple quality relationship	54.02	8.45	16	68	-1.15	2.06

Note: For ACE, the reported values correspond to those obtained before normalization.

CORRELATION ANALYSES

The results of the correlational analysis indicated a significant, negative and weak relationship between adverse childhood experiences and couple relationship quality ($r = -0.16$, $p = 0.027$). This inverse relationship suggests that higher scores on the adverse childhood experiences are associated with lower scores on relationship quality (see Table 2). Thus, H1 is confirmed.

Table 2

Pearson correlations between the main study variables

Variable	1	2	3	4	5
1. Adverse Childhood Experiences	—				
2. Conflict engagement	.26**	—			
3. Positive problem solving	-.14	-.32**	—		
4. Withdrawal	.31**	.49**	-.30**	—	
5. Compliance	.23**	.16*	-.11	.40**	—
6. Couple relationship quality	-.16*	-.36**	.31**	-.22**	-.19**

Note: * $p < 0.05$; ** $p < 0.001$

We found a significant, positive but weak relationship between adverse childhood experiences and conflict engagement ($r = 0.26$; $p < 0.001$) and compliance ($r = 0.23$; $p = 0.01$). There is also a significant, positive, but medium relationship between adverse childhood experiences and conflict withdrawal ($r = 0.31$; $p < 0.001$). Thus, the relationship being positive, directly proportional, as the scores on ACE increase, the scores on the conflict engagement, compliance and conflict withdrawal variables also increase, all of which are dysfunctional conflict resolution styles. However, the results indicate that there is a non-significant relationship between adverse childhood experiences and constructive conflict styles ($r = -0.14$; $p = 0.055$) (see Table 2). H2 is only partially confirmed.

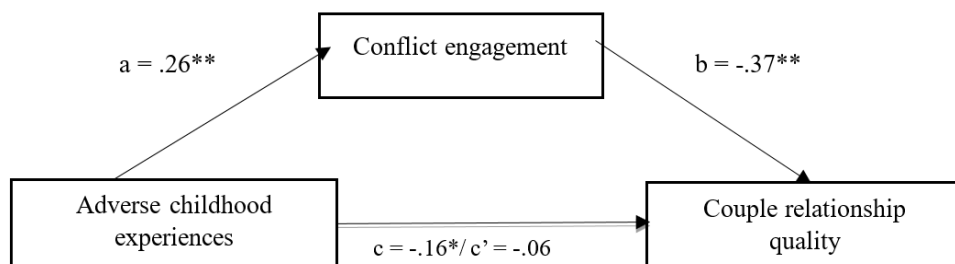
A significant, negative and moderate relationship between conflict engagement and couple relationship quality was found ($r = -0.36$; $p < 0.001$). Thus, as scores on the conflict engagement variable increase, scores on couple relationship quality decrease. Additionally, there are significant, negative, but weak relationships between couple relationship quality and conflict withdrawal ($r = -0.22$; $p = 0.003$), as well as compliance ($r = -0.19$; $p = 0.009$). As scores on conflict withdrawal and compliance in conflict increase, scores on couple relationship quality decrease. The results also indicate a significant, positive, and moderate relationship between positive problem solving and couple relationship quality ($r = 0.31$; $p < 0.001$). Thus, as scores for positive problem solving increase, scores for couple relationship quality also increase (see Table 2). H3 is confirmed.

MEDIATION ANALYSES

To test the forth hypothesis, multiple regression analysis were conducted. In the first one, couple relationship quality was the criterion variable and the adverse childhood experiences were the predictor variable. The regression analysis was significant, $F(1; 173) = 4.97$, $p = 0.027$. ACE ($\beta = -0.16$, $p = 0.027$) emerged as a significant and negative predictor of couple relationship quality. Individuals who experienced more ACEs report lower relationship satisfaction.

a. The indirect effect of ACE on couple relationship quality through conflict engagement (see Figure 1)

ACE was a significant positive predictor of the mediator, conflict engagement ($\beta = 0.26$, $p < 0.001$). In turn, the mediator was a significant negative predictor of couple relationship quality ($\beta = -0.36$, $p < 0.001$). Thus, the multiple regression analysis showed that after controlling for conflict engagement, ACE were no longer a significant predictor of couple relationship quality ($\beta = -0.06$, $p = 0.34$), while conflict engagement remains a significant and negative predictor of couple relationship quality ($\beta = -0.37$; $p < 0.001 < 0.05$). The Sobel test showed that the indirect effect was significant ($p = .002$).



Note: a, b, c, c' – standardized regression coefficients; * $p < 0.05$; ** $p < 0.001$.

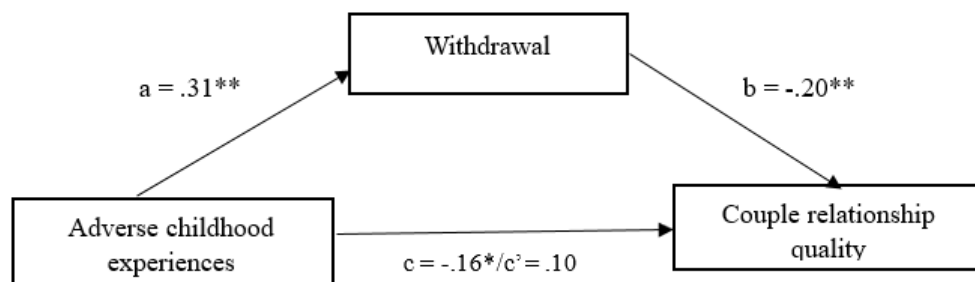
Figure 1. The mediating role of conflict engagement style in the relationship between ACE and couple relationship quality.

- b. The indirect effect of ACE on couple relationship quality through withdrawal (see Figure 2)

ACE was a significant positive predictor for the mediator withdrawal ($\beta = 0.31$, $p < 0.001$). In turn, the mediator was a significant negative predictor of couple relationship quality ($\beta = -0.22$, $p = 0.003$). Thus, the multiple regression analysis showed that after controlling for withdrawal, ACE were no longer a significant predictor of couple relationship quality ($\beta = -0.10$, $p = 0.188$), while withdrawal remains a significant and negative predictor of couple relationship quality ($\beta = -0.20$; $p = 0.009$). The Sobel test showed that the indirect effect was significant ($p = .02$).

- c. The indirect effect of ACE on couple relationship quality through compliance (see Figure 3)

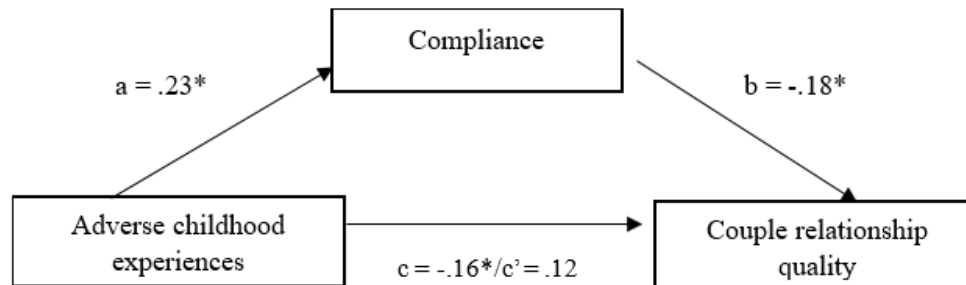
ACE was a significant positive predictor of the mediator, compliance ($\beta = 0.23$, $p = 0.001$). The mediator, compliance, was a significant negative predictor of couple relationship quality ($\beta = -0.19$, $p = 0.009$). The multiple regression analysis showed that after controlling for compliance, ACE were no longer a significant predictor of couple relationship quality ($\beta = -0.12$; $p = 0.110$), while compliance remains a significant and negative predictor of couple relationship quality ($\beta = -0.18$; $p = 0.014$). The Sobel test showed that the indirect effect was significant ($p = .04$).



Note: a, b, c, c' – standardized regression coefficients; * $p < 0.05$; ** $p < 0.001$.

Figure 2. The mediating role of withdrawal in the relationship between ACE and couple relationship quality.

Positive problem solving was not included in the regression analysis or the mediation model, as it did not show a significant association with adverse childhood experiences.



Note: a, b, c, c' – standardized regression coefficients; * $p < 0.05$; ** $p < 0.001$

Figure 3. The mediating role of compliance in the relationship between ACE and couple relationship quality.

DISCUSSIONS

The goal of this study was to test whether couple conflict styles mediated the relationship between adverse childhood experiences and couple relational quality. Our results confirmed most of the hypotheses and showed that when participants reported higher levels of adverse childhood experiences, they also engaged in more negative couple conflict styles, which, in turn, was associated with a lower quality of the relationship. These results are consistent with other research in the field, showing that individuals who have gone through negative experiences in childhood are more likely to use dysfunctional strategies and negative tactics to approach and resolve conflicts in the couple relationship (Delevi *et al.*, 2012; Demir, 2023). Also, adverse childhood experiences negatively impacted the level of satisfaction (Sheffler *et al.*, 2019). Finally, the strategies used to resolve conflicts were strong indicators of relationship satisfaction, dysfunctional styles such as conflict engagement and withdrawal being linked to reduced relationship satisfaction and quality (Flora & Segrin, 2015; Kurdek, 1994).

The first hypothesis was confirmed. The negative link found between adverse childhood experiences and relationship quality is in line with the Betrayal trauma theory (Freyd, 1994). When children are exposed to negative behaviors coming from their caregivers or other close individuals, they suffer from a betrayal of trust which strongly affects their future relationships, including romantic ones (Candel, 2024; Candel & Covaş, 2023). They have troubles trusting the good intentions of their partners and can become rather suspicious or self-centered in their relationships. Thus, the development of beneficial processes such as intimacy might be hindered. Moreover, abuse, neglect and witnessing violence increase the risk of divorce and intimacy issues.

While positive problem solving was related to relationship quality, it was not linked with adverse childhood experiences. Only the dysfunctional styles were significant mediators. Thus, hypotheses 2 and 4 were only partially confirmed and hypothesis 3 was fully confirmed. This shows that dysfunctional negative couple

conflict styles play distinct roles in the association between adverse childhood experiences and relation quality. Individuals who witnessed or experienced violence in their family of origin, through behavioral modeling, experience more conflict in later romantic relationships (MacIntosh, 2019), become more hostile toward the romantic partner (Conger *et al.*, 2000), and express more negative emotions (Kim *et al.*, 2001). They are also more likely to use more dysfunctional strategies and negative tactics for approaching and resolving conflict in couple relationships (Demir, 2023). Both experiencing conflict and the poor use of conflict resolution tactics are strong indicators of low relationship satisfaction (Cooper *et al.*, 2018; Flora & Segrin, 2015). On the contrary, the level of adverse childhood experiences was not related to positive problem solving, meaning that the use of functional conflict resolution tactics was not particularly related to past negative events.

IMPLICATIONS FOR RESEARCH AND PRACTICE

The main practical implication of the study is related to the important role played by dysfunctional couple conflict styles. Since there is no relationship between adverse childhood experiences and positive problem solving, interventions should focus on the negative aspect of conflict resolution. In recent years, multiple studies have shown that healthy emotion regulation and the use of mindfulness are crucial factors that can improve relational quality for individuals who experienced adverse childhood events (Cameron *et al.*, 2018; Cooper *et al.*, 2018; Godbout *et al.*, 2019). Moreover, functional emotion regulation not only decreases conflict, but can spillover and impact relationship quality (Halperin, 2014; Low *et al.*, 2019). Thus, future intervention can focus on training the individuals exposed to negative childhood events to use various emotional regulation and mindfulness strategies to improve their conflict resolution styles and, through them, the functioning of their intimate relationships.

LIMITATIONS

Despite its implications, the study has some limitations. First, the data is cross-sectional, and the mediation analysis, despite being significant, cannot indicate any causal relationship between the variables. There was also a discrepancy in the demographic characteristics of the sample, with less than 20% of the participants being men. This cannot allow us to generalize the results for any other population except for young women. Finally, the adverse childhood experiences were measured during adulthood, not at the time when they happened. Thus, the recollection of these experiences can minimize or heighten their impact.

CONCLUSIONS

This research aimed to investigate the relationships between adverse childhood experiences, conflict styles, and couple relationship quality during adulthood. Dysfunctional conflict styles were positively related to the former and mediated its associations with decreased relational quality. The study is important

because it shows how the individuals who experienced abuse during childhood fare in their intimate relationships and how their relationship processes are related to their past.

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